

PRISONER'S CIVIL RIGHTS COMPLAINT (Rev. 07/2021)

IN THE UNITED STATES DISTRICT COURT
FOR THE Southern DISTRICT OF TEXAS
Houston DIVISION

United States Courts
Southern District of Texas
FILED

AUG 30 2021

Nicholas David Mosquera #349115
Plaintiff's Name and ID Number

Nathan Ochsner, Clerk of Court

Montgomery County Jail, Conroe Texas 77301
Place of Confinement

CASE NO. _____
(Clerk will assign the number)

v.

Texas Commission on Jail Standards 300 W 15th St. Ste 503
Defendant's Name and Address

Rand Henderson, Sheriff, One Criminal Justice Dr. Conroe Texas 77301
Defendant's Name and Address

Montgomery County Jail, One Criminal Justice Dr. Conroe Texas 77301
Defendant's Name and Address
(DO NOT USE "ET AL.")

INSTRUCTIONS - READ CAREFULLY

NOTICE:

Your complaint is subject to dismissal unless it conforms to these instructions and this form.

1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
2. Your complaint must be legibly handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, **DO NOT USE THE REVERSE SIDE OR BACK SIDE OF ANY PAGE.** ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

FILING FEE AND IN FORMA PAUPERIS (IFP)

1. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$52.00 for a total fee of **\$402.00**.
2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at your prison unit.
3. The Prison Litigation Reform Act of 1995 (PLRA) provides "... if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$52.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

CHANGE OF ADDRESS

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "**NOTICE TO THE COURT OF CHANGE OF ADDRESS**" and shall not include any motion for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

I. PREVIOUS LAWSUITS:

- A. Have you filed *any* other lawsuit in state or federal court relating to your imprisonment? ☒ YES ☐ NO
- B. If your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)
 1. Approximate date of filing lawsuit: January 25th 2021
 2. Parties to previous lawsuit:

Plaintiff(s) NICHOLAS DAVID MOSQUERA

Defendant(s) Rand Henderson, Sheriff, et al.
 3. Court: (If federal, name the district; if state, name the county.) Southern District
 4. Cause number: 4:21-CV-00246
 5. Name of judge to whom case was assigned: David Hittner
 6. Disposition: (Was the case dismissed, appealed, still pending?) Don't know status
 7. Approximate date of disposition: _____

II. PLACE OF PRESENT CONFINEMENT: Montgomery County Jail, One Criminal Justice Dr. Conroe, TX 77301

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Have you exhausted all steps of the institutional grievance procedure?

☒ YES ☐ NO

Attach a copy of your final step of the grievance procedure with the response supplied by the institution.

IV. PARTIES TO THIS SUIT:

A. Name and address of plaintiff: NICHOLAS DAVID MOSQUERA, ONE Criminal Justice Dr, Conroe, Texas 77301.

B. Full name of each defendant, his official position, his place of employment, and his full mailing address.

Defendant #1: Texas Commission on Jail Standards, Texas agency that regulates Texas County jails. 300 W 15th Street STE. 503 Austin, Texas 78701

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
Texas commission on Jail Standards omitted its duties to ensure my safety and freedom from arbitration, cruel and unusual punishments and others. The commission failed to ensure and regulate the Montgomery County Jail properly and effectively. So that the Jail would remain in full compliance with state and federal law.

Defendant #2: Montgomery County Jail, One Criminal Justice Dr. Conroe TX, 77301

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
Montgomery County Jail omitted its duties to follow state and federal law and as a result has caused and continues to cause cruel and unusual punishments inflicted on me.

Defendant #3: Rand Henderson, Sheriff of Montgomery County, and Operator of Montgomery County Jail. One Criminal Justice Dr. Conroe, TX 77301

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.
The Sheriff omitted his duties by not holding deputies responsible and not enforcing the policy of his department, allowing arbitration, and cruel and unusual punishments, the Sheriff failed to ensure all deputies and Jailers of the Montgomery County Jail follow Sheriff office policies, and has refused to discipline or correct the ones who've failed to do so.

Defendant #4: Deputy Sheriff Lt. Fluellen, One Criminal Justice Dr. Conroe, TX 77301.

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Imposed cruel and unusual punishments on me intentionally or neglected to stop the abuse.

Defendant #5: Deputy Sheriff Lt. Gonzales, One Criminal Justice Dr. Conroe, TX 77301

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Imposed / inflicted cruel and unusual punishments on me or neglected to stop the abuse.

V. STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.

I will name several complaints, All of which arose from one incident, A camera being covered in a room I have now been forced to stay in for 9 months and days. The latest claim happened around or on August 16-17, 2021. I was placed in what is known as or called a restraint chair by a Deputy Sheriff Sergeant Harper and Deputy Sheriff Sergeant Martin for covering the camera in the room I am in. I was placed in this chair for over 12 hours consecutively from 4:00 p.m. until 5:30 a.m. the next day August 17, 2021. This complaint continues on separate pages.

VI. RELIEF:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

One Billion Dollars. All of the mentioned Deputies and Jailers need to be held liable criminally for their behaviour and fired, Immediate release from confinement/detention at the Montgomery County Jail.

VII. GENERAL BACKGROUND INFORMATION:

A. State, in complete form, all names you have ever used or been known by including any and all aliases.

NICHOLAS DAVID MOSQUERA

B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.

VIII. SANCTIONS:

A. Have you been sanctioned by any court as a result of any lawsuit you have filed? YES ☒ NO

B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed sanctions (if federal, give the district and division): _____

2. Case number: _____

3. Approximate date sanctions were imposed: _____

4. Have the sanctions been lifted or otherwise satisfied? YES NO

C. Has any court ever warned or notified you that sanctions could be imposed? _____ YES ☒ NO

D. If your answer is "yes," give the following information for every lawsuit in which a warning was issued. (If more than one, use another piece of paper and answer the same questions.)

1. Court that issued warning (if federal, give the district and division): _____
2. Case number: _____
3. Approximate date warning was issued: _____

Executed on: 08-21-2021
DATE

NICHOLAS DAVID MOSQUERA
N. Mosquera
(Signature of Plaintiff)

PLAINTIFF'S DECLARATIONS

1. I declare under penalty of perjury all facts presented in this complaint and attachments thereto are true and correct.
2. I understand, if I am released or transferred, it is my responsibility to keep the court informed of my current mailing address and failure to do so may result in the dismissal of this lawsuit.
3. I understand I must exhaust all available administrative remedies prior to filing this lawsuit.
4. I understand I am prohibited from bringing an *in forma pauperis* lawsuit if I have brought three or more civil actions or appeals (from a judgment in a civil action) in a court of the United States while incarcerated or detained in any facility, which lawsuits were dismissed on the ground they were frivolous, malicious, or failed to state a claim upon which relief may be granted, unless I am under imminent danger of serious physical injury.
5. I understand even if I am allowed to proceed without prepayment of costs, I am responsible for the entire filing fee and costs assessed by the court, which shall be deducted in accordance with the law from my inmate trust account by my custodian until the filing fee is paid.

Signed this 21st day of August, 20 21.
(Day) (month) (year)

NICHOLAS DAVID MOSQUERA
N. Mosquera
(Signature of Plaintiff)

WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.

Pg 11 of 5

Continued complaint; I stayed in the restraint chair for 12 hours straight and was threatened by ~~See~~ Seargent Jailer Detention officer McCray to be left in the chair for 24 hours, Jailer McCray shift started at 7:00p.m. after I had been in the chair at that time for about 3 hours. I was removed from the chair at around 5:45 a.m. but only after crying begging and pleading to be taken. Which Jailer McCray, and ~~Det~~ Deputy Sheriff Lieutenant Gonzales said "I better cry" and "All I do is cry." "I am known for crying" ON several different occasions.

#1. The first incident happened around December I was Illegally arrested and detained November 13, 2021 by Conroe Police officer T. Sutton. brought to the Montgomery county Jail. Upon arriving in the Montgomery County Jail I stated Black power (in reference to black empowerment) and Black lives matter. Nothing else was said or done. Those statements are what I assume led to me being placed in a 24 hour cell on constant 24 hour watch by a camera. I believe They have been using the camera as a way to hide their racism, and to "Justify" their actions, and/or abuse. I have asked to be moved several time out of this area and was moved twice in 9 months, both times brought back for frivolous reasons ~~the~~ ~~to~~ do to valid complaints that should have be addressed since I was the complainant. Instead of them being addressed I was

Pg 2
of
5

Jailers conspired against me, and formulated plots to get me moved back to this area, to continue the ~~assaults~~ assaults and harrassments,

2. I was left in a cell 100% nude for over 24 hours.

3. I was left in a violent cell with a smock or suicide blanket for over 48 hours straight in urine, and feces.

4. I was left in a "detox" cell, though I was not detoxing from drugs in the front of the Jail for over 96 hours, or around 4-5 days with nothing in their no mattress, no blanket, No T.V., No News outlets or articles, No phone, Nothing.

5. I have been on "phone restrictions" where I can not call my family for around 6 months straight, They blocked all numbers attached to my I.D. So I can not call anyone, The lawyer appointed to me through indigent defense does not accept calls, Charles W. Crowl, and he is of no help or assistance in this matter.

6. I have been tased with a taser gun multiple times by Detention Sergeant Jailer Almazan or Almazan (Don't know the correct spelling he works at the Montgomery County Jail, one Criminal Justice

Pg 3
of
5

7. I have been threatened with a ~~fer~~ by several other Jailers and deputies Including but not limited to Jailer McCray, Deputy Sergeant Harper and others.

8. There was an officer who said to me personally the camera was a supplement to the timer on the outside of the Door of the cell I am in and that it did not matter if the camera was covered or not because it was not in the Sheriff's policy, Instead they have to get a visual on everyone in the room regardless of the camera. That officer was Deputy Sheriff Sergeant Dodson.

9. The Jail has refused to give me an in forma paupis form. I would like to proceed in forma paupis.

10. There has been several other incidents not mentioned on and possibly off camera all video needs to be gathered and viewed. Each incident Since arriving in this Jail stemmed from being in this area where around 90-95% stemmed directly from the camera being covered.

11. Attached are a few grievances filed Since arriving here. The grievance officer Detention Jailer Koenig No longer replies to the grievances I file.

Pg 9 of 5

12. Both Lieutenant Deputy sheriffs Pluellen, and Gonzales are fully aware of my situation and both at times have ~~not~~ aided in the abuse or ordered the abuse directly. Or stood around ~~it~~ and watched without Interfering to stop it. Both said regardless of the Sheriff's policy, "I ain't never getting out of this cell / room." and that there "was nothing I could do." Because "This was / is there house." and "They run this Jail", That "I didn't run shit." It is not my intentions to run a Jail only to be treated equal and fair.

13. On several occasions while I was being attacked several other Inmates or detainees in this same Area had their cameras covered, with nothing done to them, mostly white inmates / detainees, and on several ~~occasions~~ occasions They (the white inmates) would cover their cameras, and request to be moved out of this area do to being monitored on camera and most times within minutes, hours or in some instances days they were moved without a problem. These claims go back to November 13, 2021 and can 100% be validated up until today August 20, 2021. By viewing cameras while I was being attacked in this same area, multiple will appear white screened or covered by different articles,

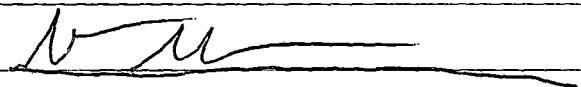
Pg 5 of 5

these are all isolated incidents against mainly me and me only. which I believe were brought about by 'white supremacist' or undercover racist and biggots who did not agree with what I said or how I felt from the day I was brought here, and since that day they have been trying to "break my spirit," silence me, and make me acquiesce to white supremacy in the form and methods of this abuse, cruel and unusual punishment, and under the guise of making me "behave", though that is not their duty. Several Jailers and Deputies have stated this claim, that they "will make me behave." They are going about it by trying to enforce a rule that doesn't exist and enforce something unenforceable, and in return subjecting me to cruel and unusual punishment, unfair treatment, mental anguish, and inequality.

14. Sergeant Deputy Sheriff Page is the first aggressor with Detention Jailer Sergeant Beadeux or Badeux (The name changed from Beadeux to Badeux since arriving at this facility, so did Almazan from Jailer Sergeant Almazan, to Almazan.) and Sergeant Almazan or Almazan, Detention officer Wall, all of whom are still employed and actively working at/in the Montgomery County Jail. As well as others mentioned in the first lawsuit 4:21-CV-00246, in the Southern District, Judge David Hittner, they may not be mentioned in this one, but are still none the less involved and

The way I am being treated is unfair. I have been in this room now or a room similar to this one for 9 months straight. I am tired of being in this room or aggravated by the fact that I am still in this room and in this position. I feel 100% "Boxed in" enclosed. I have constantly being targeted and plotted against for no ~~apparent~~ apparent reason other than the way I think and express myself for being black in America. That is my only true crime. Being born black in America surrounded at the moment by racist and bigots who hate me for the words I've said. Nothing else. I have been attacked to the point I deemed it necessary to defend and protect myself against future and further attacks. The Sandra Bland Act, is the Legislative act in Texas that allows a camera to be affixed in the room, if the Jail can afford it, if not then a timer on the door is sufficient. No where in the act does it mention the necessity of the camera. Again which would provide further proof the ~~camera~~ camera is indeed a supplement to the timer on the outside of the door. which the Sergeant, Deputy sheriff Dodson stated to me. It is hurtful to know that a woman, a Black woman was killed by police, allegedly, and the State of Texas and the people thereof found it ~~necessary~~ necessary to pass an act to prevent further or future allegations of that nature. Only for bigots to use the camera in the act as an excuse and reason to attack me, a Black man. I believe this treatment is contrary to the intent and/or purpose of the Sandra Bland Act. I need the court

to order The Sheriff of Montgomery County, and the Montgomery County Jail and its staff to move me out of this restricted environment as soon as possible. Immediately. I do not have access to anything. I am constantly in this cell 24 hours a day 7 days a week. This is frustrating. They have regular areas where Detainees are not in a cell none 24 hours 7 days a week. Outdoor detainees (All or most are white to my knowledge) and even detainees in areas known as 23 and 1 or 23 hours a day in a cell and 1 hour out. I need to be moved ~~a~~ Immediately, for my mental health and sanity. The only issue has been this camera and Deputies and Jailers ~~all~~ alike acting under color of law. To rule by law instead of being Under the rule of law, like every citizen in United States of America and each of its States and Territories are to be. This type of behaviour from Deputies and Jailers should be proclaimed as unconstitutional, unlawful, cruel and unusual. If not already the case. Every incident that arouse from this camera should be deemed an unlawful act, which it 100% is, based on the true intent of the **Sandra Bland Act** and not the twisted perverted minds of the Deputies and Jailers whom intentionally misconstrued the language of the Act for malicious intent.


One Criminal Justice Dr.
Conroe, Texas 77301
Nicholas D. Mosquera

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT

INMATE ~~GRIEVANCE FORM~~

Internal Affairs

TO: Internal Affairs

PIN#

349115FROM: Nicholas MosqueraCELL LOCATION: 2D 24hrsDATE FILED: 3.27.2021DATE CONFINED: 11.13.2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

Today a man named Christopher (to my knowledge) passed out, hit his head hard on the floor, and went unconscious for a brief moment. While I was watching things unfold, The Grievance officer, D.O. Koenig ~~closed~~ Impeded ~~off~~ my view by closing the window to the room I am ~~housing~~ housed in. It was of grave concern to me. To Witness → Back page YOUR SIGNATURE Nicholas Mosquera

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoenigDate: 4.12.21

Forwarded to: _____

Date: _____

ACTION TAKEN

This incident was recorded by Jail Staff. No action taken

This Grievance was sent to I.A. via USPS which is why there was not a response in 10 Days.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM:

Nicholas Mosquera

CELL LOCATION:

24hr 2-D

DATE FILED:

04.08.2021

DATE CONFINED:

11.13.2021

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

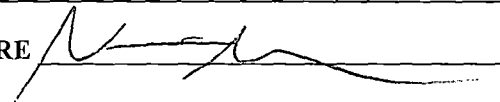
IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

It is illegal federally to withhold and or confiscate federal mail both of which is being done. This is my only warning. I need my mail to go out properly and return, or be sent to me without interference.

YOUR SIGNATURE



NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by:

Kocnis

Date:

4.12.21

Forwarded to:

Date:

ACTION TAKEN

This does not meet the specifics to constitute a grievance.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT

INMATE GRIEVANCE FORM

Internal Affairs

Internal Affairs

TO: ~~GRIEVANCE OFFICER~~

PIN#

345/15

FROM:

Nicholas Masquer

CELL LOCATION:

24hrs 2D

DATE FILED:

03-27-2021

DATE CONFINED:

11/13/2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

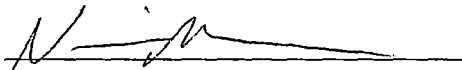
I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I witnessed an officer, Axmaker talk to a guy in 2C around 12:48 p.m. After the guy was kicking the door several times. The guy told officer (D.O.) Axmaker that he would kill himself if Axmaker did not hurry up and remove him from the cell. Axmaker left and came back approximately 5 minutes later with Sgt. Bradeux

→ Back page

YOUR SIGNATURE



NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by:

Koenig

Date:

4.12.21

Forwarded to:

Date:

ACTION TAKEN

This incident was recorded by Jail Staff. No Action taken. Log # 2776978

This Grievance was sent to IA via usps and returned to me which is why it is longer than 10 days.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT

~~INMATE GRIEVANCE FORM~~TO: Lt. Henrice
~~GRIEVANCE OFFICER~~Internal Affairs 349115
PIN#FROM: Nicholas MosqueraCELL LOCATION: 24hrs IDDATE FILED: 03.16.2021DATE CONFINED: 11.13.2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I was called a coward by officer wright and also threatened by this same Detention officer. I believe this officer is racist and hateful towards Black people. This officer is a threat to the people of the Black community/communities in America. He also assaulted me by grabbing my arm and shaking it. I would like to pursue charges against this officer.

YOUR SIGNATURE N. Mosquera

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoenigDate: 3.24.21

Forwarded to: _____

Date: _____

ACTION TAKEN

This was forwarded to IA. They sent it back to me and told me to send this to his supervisor for review. This has been sent to Sgt. Dodson via email. If corrective action is needed, it will be handled internally.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM: Nicholas MosqueraCELL LOCATION: 2G-74hrsDATE FILED: 01-10-2021DATE CONFINED: 11-13-2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

On Friday January 8, 2021 I was again ~~attacked~~ attacked by Sgt. Page. Sprayed with almost or maybe even a whole canister of chemicals. I fear for my life when dealing with this guy. Please someone help. If at all possible can I be moved to another area in the jail away from him, or he moved far away from me. Why is this guy still allowed to

YOUR SIGNATURE

N. Mosquera

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoenigDate: 1.11.21Forwarded to: LT. FluellenDate: 1.11.21

ACTION TAKEN

I am forwarding this to LT. Fluellen. If any further action is needed, LT. Fluellen will address it.

Incident documentation reviewed. No inappropriate conduct noted. All force reasonable. No evidence of inmate being harassed.

-LT Fluellen 897

Cap. He is not doing his job by attacking me. He is trying to humiliate and force me into his "submissive will" what he is doing is illegal, please help. remove this guy or remove me. I fear for my life, health and safety when face to face with this monster. This guy is a coward, who ~~does not~~ abuses power.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN# 349115FROM: Nicholas MosqueraCELL LOCATION: 24 hr CGDATE FILED: 01-14-2021DATE CONFINED: 11-13-2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I continue to have problems with Sgt. Page and Sgt. Braden. They keep taking my legal paperwork delaying the process of me filing motions to the court, that could help with my release. They take my property specifically Sgt. Page and destroy it or have it partially returned after a few days or over a week. This is illegal and has to stop.

YOUR SIGNATURE

N. Mosquera

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KanisDate: 1.15.21

Forwarded to: _____

Date: _____

ACTION TAKEN

I am forwarding this to LT. Flecken. If any further action is needed, LT. Flecken will address it.

Incidents reviewed. No evidence of any unlawful deprivation of property or legal materials. When property is taken it is for legal & safety reasons and is returned as quickly as possible.

LT. Flecken 8934

According to a Lieutenant, and another Sergeant. He keeps harassing me, and taking my property as well as assaulting me with chemicals this guy needs to be moved or I myself need to be moved into a regular area. I will protect myself and rights at all cost even if it means death to me or him. (I am not suicidal or homicidal, but dealing with him ~~is~~ this is how I feel.)

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM:

Nicholas Mosquera

CELL LOCATION:

24 hr CG

DATE FILED:

01.14.2021

DATE CONFINED:

11.13.2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I continue to have problems with Sgt. Page and Sgt. Bradeaux. They keep taking my legal paperwork delaying the process of me filing motions to the court, that could help with my release. They take my property specifically Sgt. Page and destroy it or have it partially returned after a few days or over a week. ~~This~~ This is illegal and has to stop.

YOUR SIGNATURE

N. Mosquera

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by:

Koenig

Date:

1.15.21

Forwarded to:

Date:

ACTION TAKEN

I am forwarding this to LT. Flavelle. If any further action is needed, LT. Flavelle will address it.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN# 349115FROM: Nicholas MoseveraCELL LOCATION: 76-24hrs.DATE FILED: 01-08-2021DATE CONFINED: 11-13-2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I was ~~scheduled~~ scheduled to go to court Jan 7, 2021 and never went. I asked an officer for an explanation as to why I did not go to court. He said he did not have an answer and that I had been rescheduled to go March 4, 2021. Who can I speak with about this? How is this possible? How can I not go to court on the scheduled date?

YOUR SIGNATURE N. Mosevera

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoenigDate: 1-15-21

Forwarded to: _____

Date: _____

ACTION TAKEN

Not a grievable offense. Try writing to your Attorney.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM: Nicholas MosqueraCELL LOCATION: 26-74hrsDATE FILED: 01.10.2021DATE CONFINED: 11.13.2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

On Friday January 8, 2021 I was again ~~attacked~~ attacked by Sgt. Page. Sprayed with almost or maybe even a whole canister of chemicals. I fear for my life when dealing with this guy. Please someone help. If at all possible can I be moved to another area in the jail away from him, or he moved far away from me. Why is this guy still allowed to

YOUR SIGNATURE

Nicholas Mosquera

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoenigDate: 1.11.21Forwarded to: LT. FluellenDate: 1.11.21

ACTION TAKEN

I am forwarding this to LT. Fluellen. If any further action is needed, LT. Fluellen will address it.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM: Nicholas MosqueraCELL LOCATION: 24hrs-76DATE FILED: 02.03.2021DATE CONFINED: 11.13.2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

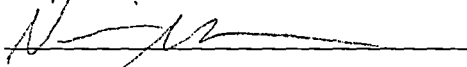
IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I have a problem with D.O. Vasquez. Everytime he works in this area he consistently does not do his job. When I ask him for request forms or a newspaper he replies "I ain't doing shit for you nigger". Today I asked to speak with a SGT. and he said the exact same thing. Something needs to be done with this racist coward guy he needs to be moved, and reprimanded.

YOUR SIGNATURE



NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by:

Koehnig

Date:

2-5-21

Forwarded to:

Date:

ACTION TAKEN

When did this occur?

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM: Nicholas MasqueraCELL LOCATION: 26-24hrsDATE FILED: 02-09-2021DATE CONFINED: 11-13-2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

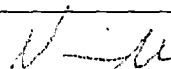
IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I need to be moved out of 24 hour lockdown cell
26. I can not sleep in constantly being awoken and I
overall don't deserve to be in this room

YOUR SIGNATURE



NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoungDate: 2-10-21

Forwarded to: _____

Date: _____

ACTION TAKEN

This does not meet the specifics to constitute a grievance.
Your institutional behavior is keeping you in 24 HR.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN# 349115FROM: Nicholas MosbuerCELL LOCATION: 26-24hrsDATE FILED: 01.23.2021DATE CONFINED: 11.13.2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I keep putting in request to receive information, such as address, etc. for the following agencies: Civil Rights Corps, Texas Indigent defense Commission, Texas Jail Project, Justice Management Institute, and the Texas Commission on Jail Standards, Texas State Bar Association, None of which I have received. I need this information.

YOUR SIGNATURE

N Mosbuer

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KocalsDate: 1.25.21

Forwarded to: _____

Date: _____

ACTION TAKEN

This does not meet the specifics of a grievance. When you are brought down to the law library you can gather all this information.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN# 349115--FROM: Nicholas MasquerenaCELL LOCATION: 26-24hrsDATE FILED: 01-23-2021DATE CONFINED: 11-13-2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I keep putting in request to go to the Law Library, and to have items returned to me, like motions, from the Law Library; None of which have been returned or answered I feel like and I know this is holding me in jail by not filling the appropriate motions, and could hurt my right to a fair trial. I need to go to the Law Library.

YOUR SIGNATURE

N. Masquerena

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for your grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KanisDate: 1-25-21

Forwarded to: _____

Date: _____

ACTION TAKEN

You are on the list to come down to Law Library. Due to Covid we are only allowed to bring one inmate at a time down.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM: Nicholas Mosquera

CELL LOCATION: 2G-24hr.

DATE FILED: 12-29-2020

DATE CONFINED: 11-13-2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

Due to Sgt Page I am being confined in this room 24hrs 7 days a week. I am not allowed to leave for nothing. Not even to see a doctor. This treatment is driving me crazy. They refuse to let me go outside for rec. (Mr. Cathey) I am becoming more and more aggravated and stressed out. If someone does not stop Sgt. Page I will stop him myself, however I can. I am not allowed proper clothing or any of my legal material.

YOUR SIGNATURE

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: Koenig

Date: 12-31-20

Forwarded to:

Date:

ACTION TAKEN

Our records indicate that you were offered recreation time 12/28, 12/29, 12/30, 12/31, 12/22, 12/23.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM: Nicholas Mosquera

CELL LOCATION: 24hr. 1D

DATE FILED: 03.25.2021

DATE CONFINED: 11.13.2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I am constantly having problems/Issues with A Detention officer Sgt, by the name of Almazon. About a camera in the room/cell I am in being covered. I have requested to be moved from this room several times with nothing happening in four months with the exception of being moved for about one week then moved right back. D. O. Sgt. Almazon has threatened → back page

YOUR SIGNATURE

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: Koenig

Date: 3.26.21

Forwarded to:

Date:

ACTION TAKEN

Your continued ~~naive~~ behavior and lack of following Jail rules is what keeps you in a camera cell

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN# 349/15FROM: Nicholas MosqueraCELL LOCATION: 24hr 1DDATE FILED: 03/25/2021DATE CONFINED: 11-13-2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I noticed a Sgt Deputy Page, roaming around my room/ area today, this is the same Deputy Sgt. I've had several problems with. At around 1 p.m. he was in front of my door I don't know why. It sent fear running through my mind as well as anger. To my knowledge he was removed from the jail or placed on Administrative duties, and was told to ^{Back Page} YOUR SIGNATURE N-M

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoenigDate: 3-26-21

Forwarded to: _____

Date: _____

ACTION TAKEN

Sgt. Page was never placed on administrative duties or removed from the jail.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM: Nicholas MosqueraCELL LOCATION: 24hrs 4DDATE FILED: 03/18/2021DATE CONFINED: 11-13-2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

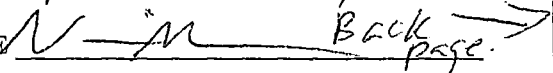
IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I am constantly being Harassed by Sgt. Beadeux Threatend with a faser and abused by her and other officers. I was left in a detox holding cell for 24 hours for what she said covering a camera this has to stop. Sgt. Page was removed for this why hasn't Sgt. Beadeux been removed? She is just as bad and in fact it was them both together that started this problem. They have...

YOUR SIGNATURE



Back page →

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoenigDate: 3.22.21Forwarded to: Lt. FluelenDate: 3.23.21

ACTION TAKEN

Mr. Mosquera,

I have familiarized myself with the documentation for these incidents. I have also observed several of them myself. This grievance is unfounded due to the incidents being within law/policy.

- Lt. Fluelen

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

349115

FROM: Nicholas MosqueraCELL LOCATION: 24hrs. 1DDATE FILED: 03-25-2021DATE CONFINED: 11/13/2020

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

A Lt. Fuellen has refused to feed me lunch do to a complaint I had about the diet. Instead of fixing the complaint he is now saying I refused to eat which is not true at all. I need to eat. All to often does this happen. How can anybody get away with refusing to feed someone? I have to eat. I can not continue to be treated this way day after day.

YOUR SIGNATURE

N Mosquera

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KoenigDate: 3-26-21

Forwarded to: _____

Date: _____

ACTION TAKEN

You receive a diet tray. If you do not accept your diet tray, we take that as a refusal especially if there is nothing wrong with the tray.

MONTGOMERY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM

TO: GRIEVANCE OFFICER

PIN#

3/9/15

FROM: Nicholas MosqueraCELL LOCATION: 24hrs-76DATE FILED: 02.03.2021DATE CONFINED: 11.13.2021

A GRIEVANCE IS:

1. A VIOLATION OF CIVIL RIGHTS or
2. A CRIMINAL ACT OCCURS or
3. A DENIAL OF INMATE RIGHTS OR PRIVILEGES or
4. A PROHIBITED ACT BY A DEPUTY OR A STAFF MEMBER or
5. A VIOLATION OF THE AMERICANS WITH DISABILITIES ACT

IF THE COMPLAINT IS FOUND TO BE A GRIEVANCE, THEN A COMPLAINT NUMBER WILL BE ASSIGNED. DO NOT FILL OUT THIS FORM IF ONE OF THESE ACTS DID NOT OCCUR. IF YOU FEEL THIS IS A GRIEVANCE, PUT IT IN A SEALED ENVELOPE AND IT WILL BE DELIVERED TO THE GRIEVANCE OFFICER.

I WISH TO FILE A GRIEVANCE. MY STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

STATEMENT

I have put in request to central Jail Records several times and to the Law Library for a print out saying that I am currently incarcerated (notice of incarceration) and a print out with my bond amount and the charges as well as it saying I am still incarcerated because of me not being able to post-bond none of which have been returned or answered its been over a month since I've submitted the first request.

YOUR SIGNATURE

NOTE: Only one issue is to be presented on each form.

IF YOU ARE SEEKING ACCOMODATION UNDER THE AMERICANS WITH DISABILITIES ACT, THIS FORM WILL BE REVIEWED WITHIN 24 HOURS.

If you dispute the Grievance Board's findings you may appeal. The Appeal Process for you grievance is outlined in the inmate handbook on page #3 under Channels of Communication.

Received by: KocnisDate: 2.5.21

Forwarded to: _____

Date: _____

ACTION TAKEN

This does not meet the specifics to constitute a grievance.

N. Mosquera
#349115 / 24h 1D
The Criminal Justice Dr.
Drioe, TX 77301

United States Courts
Southern District of Texas
FILED
AUG 30 2021
Nathan Ochser, Clerk of Court

United States District Clerk's Office
P.O. Box 61010
Houston, Texas ~~77208~~ 77208-1010

